U. of Mich. Cites Dr. Van Slyke as Research 'Leader'

Dr. C. J. Van Slyke, retired Deputy Director of NIH, was named by the University of Michigan during midyear commencement ceremonies to receive an honorary Doctor of Science degree.

The citation of Dr. Van Slyke and the hood of the D.Sc. degree were recently presented to him at his home in Bethesda, with his family present, by Dr. Myron E. Wegman, Dean of the University's School of Public Health.

PHS Surgeon General William H. Stewart and Assistant Surgeon (See DR. VAN SLYKE, Page 6)

Hemorrhagic Fever May Be Transmitted To Man by Chronically Infected Rodents

Evidence indicating that Machupo, the etiologic agent of human hemorrhagic fever in Bolivia, induced chronic asymptomatic infection in laboratory hamsters and in a laboratory colony of Calomys callosus mice, has been reported.

Viruria persisted in both groups — 509 days in the hamsters and —153 days in Calomys. A female Calomys delivered five infants 10 days after she received an intraperitoneal injection of Machupo virus. These animals remained with the mother for nine weeks, during which time virus was found in her urine. The offspring were then transferred to individual boxes, and each was shown to be viremic at 12 and 17 weeks of age. (See HEMORRHAGIC, Page 6)

Survey Reveals Change In Current Profile of American Psychiatry

Almost half the psychiatrists in the U.S. today are employed either full-time or part-time in Federal, State and local government agencies and private organizations, according to a recent comprehensive survey by the National Institute of Mental Health in cooperation with the American Psychiatric Association.

The survey, to which 98 percent of the 18,740 psychiatrists responding, showed that the current profile of American psychiatry is changing and no longer reflects the traditional emphasis on private practice serving individual patients.

Activities Vary

Slightly more than half of all psychiatrists are engaged in private practice but, even of those who are self-employed, only 40 percent are in full-time private practice. The others are also involved in such psychiatric activities as teaching, administration, consultation and research.

The Nation's pool of psychiatrists is growing at a slightly faster rate than the general population — 3 percent a year versus 1.5 percent for the country as a whole.

However, the survey pinpointed a number of manpower shortages in psychiatry. Only 9 percent, or 1,346, of the responding psychiatrists reported that their major specialty is child psychiatry. And only in Calomys — and was continuing when the report was prepared. Chronic viremia was found and related virus infections may be infected rodents has been reported Research Unit of the National In.

Biochemical Defect Not Yet Established In Mental Disease, Brodie Tells AAAS

Despite 10 or more years of biochemical research and a plethora of reported biochemical abnormalities not a single biochemical defect in mental disease has been established, Dr. Bernard B. Brodie, Chief of the National Heart Institute's Laboratory of Chemical Pharmacology, told members of the American Association for the Advancement of Science at its recent meeting in Berkeley, Calif.

Delivering the Distinguished Lecture of the AAAS Section on Pharmaceutical Sciences, for which he was awarded a plaque by the association, Dr. Brodie in his review of “Biochemical Changes Associated With Mental Illness" attacked in particular the popular concept that maintains mental illness results from a defect in intermediary metabolism and further holds this defect to be reflected by increased amounts of metabolic products in urine or plasma.

Pitfalls Pointed Out

Dr. Brodie pointed out several pitfalls of this approach. "Biochemical studies usually means analysis of urine because this fluid is readily available," he said. "This approach is akin to determining the 'lesion' in an automobile from the products that result from gasoline combustion.

"If after great difficulty the investigation (See AAAS, Page 4)

Dr. Bruce N. Ames Among Twenty-Semi-Finalists For Flemming Awards

Dr. Bruce N. Ames of the National Institute of Arthritis and Metabolic Diseases has been named one of 20 semi-finalists in the annual Arthur S. Flemming Awards program.

The 20 semi-finalists will be presented at a luncheon Jan. 27 at the National Lawyers Club. A panel of judges will select 10 of the 20 to receive the Flemming Award at a second luncheon Feb. 17 at the Statler Hilton Hotel.

Survey Reveals Change In Current Profile of American Psychiatry

Dr. Bernard Brodie at desk in his laboratory section in the Clinical Center.—Photo by Jerry Hecht.

In Section Head

Dr. Ames, a noted investigator in the field of biochemical genetics, is Chief of the Section on Microbial Genetics of the Laboratory of Molecular Biology, NIAMD.

The Arthur S. Flemming Awards program, sponsored by the D.C. Junior Chamber of Commerce in cooperation with the Civil Service Commission, was established 18 years ago to give recognition to young men who have made outstanding contributions in public service. The awards are named for the former Secretary of the Department of Health, Education, and Welfare.

Biochemical Defect Not Yet Established In Mental Disease, Brodie Tells AAAS

By Herbert B. Nichols

(SMB Seeks Session Topics For Symposium by Feb. 3)

The Supply Management Branch is planning the 16th Annual Research Equipment Exhibit and Instrument Symposium to be held here next October.

Representatives of the scientific societies who co-sponsor the symposium with NIH are meeting to develop the session topics. The symposium will deal with recent developments in research methods and instrumentation.

NIH staff members are urged to submit suggested topics to James B. Davis, Chief of the Supply Management Branch, Bldg. 12A, Rm. 4003. Suggestions must be submitted by Feb. 3.
CC Gray Service Register Needs Homes Willing to Accept Relatives of Patients

Maggie C. Spriggs, a laboratory worker in the Medicine Branch, National Cancer Institute, has found a guest to earn a bit of money, and to help others, all at the same time.

The technique is simply to register with the Gray Service at the Clinical Center, to accept relatives of patients as paying guests.

Mrs. Spriggs is one of about 80 on the Gray Service’s room registry. Some of the listed homes are within walking distance of NIH; but some, as in Mrs. Spriggs’ case, are in downtown Washington.

“It started when a patient told me her family was coming in for the weekend, and had very little money to spend,” Mrs. Spriggs recalls.

“The first I knew, my husband and I had six guests in for the weekend—the husband of a Clinical Center patient, two sisters, and three darling children. “We made do with the space available—my teenage daughter moved out of her room to the recreation room—and it was a lot of fun.”

Since then, however, Mrs. Spriggs has had only one or two visitors at a time. Her current roomer is a young man from West Virginia, Alfonso Saunders, whose mother is a CC patient.

Mrs. Spriggs helped him find a department store job during the Christmas holidays, and he now works in the CC’s Environmental Sanitation Control Department.

Relatives Need Help

“Relatives of patients are usually upset and worried, and when they find themselves in a locality strange to them, where prices are higher than they are accustomed to, they need help,” Mrs. Spriggs said.

She also arranges for her roomers to share rides in her car pool.

Similarly listed on the Gray Service room registry are two available and charge up to $5 a night double or as much as $25 a week.

Some are widows who accept only women guests; others are couples, like Mr. and Mrs. Spriggs, who accept both men and women. The Gray Service staff at the Clinical Center make the arrangements, matching the guests to the requirements of the hosts.

Those who wish to list rooms with the Gray Service registry may call Ext. 65892. Patients’ relatives who need rooms may call the same number or visit Room 13N-216, Bldg. 10. After 4 p.m., receptionists in the CC lobby take over the housing register.

Naturalist to Show Film On Wild Chimpanzees

Life among the wild chimpanzees in the African state of Tanzania will be described in a color film and commentary by a young woman naturalist who lived among them.

She is Baroness Jane van Lawick-Goodall who will present her film at 8:30 p.m. in the Lyric Theatre, 124 West Mt. Royal Ave., Baltimore.

The program is sponsored by the Maryland Academy of Sciences. Tickets on sale, may be obtained by writing the Academy at 7 West Mulberry St., Baltimore. The telephone number is MU 5-2370.
Two Nurses and Worker In CC Nutrition Retire

Two nurses and a food service worker retired recently from their duties at the Clinical Center. They are Margarette D. Fanning, a staff nurse in the Arthritis and Metabolic Diseases Nursing Service; Esther K. Johnson, a staff nurse in the Neurology and Blindness Nursing Service; and Mary L. Robbins of the Patient Dietetic Service in the CC’s Nutrition Department.

Mrs. Fanning is a World War I veteran. She volunteered after graduating from nursing school in 1918, became a member of the Army Nurse Corps Reserve and served in a variety of nursing positions before joining NIH in 1954. She adjusted quickly to the metabolic research here.

Serves in Army

Miss “Johnnie” Johnson is a veteran of World War II and the years following. During 14 years of duty she rose to the rank of captain in the Army Nurse Corps. Among her interesting experiences was a tour of duty in Germany.

During one exhausting but enjoyable 3-month period she pitched in with others to convert two German barracks buildings into an Army evacuation hospital.

Miss Johnson came to the Clinical Center on Dec. 15, 1958 and has worked in the Cancer Nursing Service and the Neurological Nursing Service.

Mrs. Robbins has worked in food service, primarily with patients, throughout her government career which began at Freedmen’s Hospital in 1953 and continued at the CC in 1957. Younger workers in the Nutrition Department will miss her sympathetic guidance.

Her main interest is in maintaining a happy home for her retired husband, and she hopes to continue her volunteer work.

No Electrical Blackout Here; DRS Ready For Emergency

Joe Maciera (right), Head of the Maintenance Inspection Unit, Plant Engineering Branch, DRS, and Sylvester Jenkins, Maintenance Engineering Section, check out an emergency diesel generator which was opened for service operating suite in the CC Surgical Wing (in background) in case of an electrical power failure.

NIH emergency equipment, inspected every week, has been used twice in the last two years for power failures. Each time, normal operations were resumed with minimum interruptions.—Photos by Tom Joy.

By Tony Anastasi

Medical investigators attempting to shed some light on their research problems should never literally be in the dark here at NIH.

Following the recent electrical blackout in the northeastern part of the country, the Division of Research Services received numerous inquiries regarding the effect of such a blackout on the operation of NIH.

The DRS Plant Engineering Branch has devised a planned system for staff operation under just such emergency conditions.

“Our emergency electrical equipment is tested regularly and is on a routine preventive maintenance program,” said Ross Holliday, PEB Chief.

System Improving

“For the past eight years there has been a steady upgrading of the system,” he said. “The expansion of the master utility system now underway will further improve flexibility and reliability, and extend emergency service to Buildings 2, 3, and 29A.”

What would happen if an electrical power failure occurred here while an operation was underway in the Clinical Center?

“Electrical services to Building 10A and the Operating Suite of Building 10 would continue,” Mr. Holliday said, “with only a brief interruption of about 10 seconds.

“The lighting in the stairwells and other critical areas of Building 10,” he added, “would be quickly replaced by emergency battery-powered lighting units.”

What would happen elsewhere on the reservation in the event of a blackout?

Air conditioning would immediately be discontinued. Steam for heating would continue with uninterrupted service.

The liquid waste (sewer system) was portable.

Joe Maciera (right), Head of the Maintenance Inspection Unit, Plant Engineering Branch, DRS, and Sylvester Jenkins, Maintenance Engineering Section, check out an emergency diesel generator which was opened for service operating suite in the CC Surgical Wing (in background) in case of an electrical power failure.

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What would happen elsewhere on the reservation in the event of a blackout?

Air conditioning would immediately be discontinued. Steam for heating would continue with uninterrupted service.

The liquid waste (sewer system) would be unaffected except in a few small areas where the system depends on sump pumps.

Water service would continue as long as the Washington Suburban Sanitary Commission elevated water storage supplies last (probably at least through the night).

Mobile engine-driven generators would be brought into operation to serve selective loads in Buildings 4, 5, 6, 7, 9, 13, and 21.

Also, a 5,000 kilovolt-ampere steam-driven turbine in Building 11 would be activated immediately. Forty-five minutes to one hour is required to bring this unit into service.

The unit would serve emergency loads in Building 10 and other buildings not provided with mobile engine-driven generators.

NIH Orchestra Presents Concert Here Feb. 4

The NIH Orchestra, sponsored by the Recreation and Welfare Association of NIH, will present the first concert of this season on Friday evening, Feb. 4, at 8:30 p.m. in the Clinical Center auditorium.

The conductor will be Mark Ellsworth, who has led the orchestra since it was organized in 1959. Included in the program will be an overture by Berlioz, a symphony by Haydn, and some Slavonic Dances by Dvorak.

Admission is free to NIH employees, their families and friends.

In short, the Division has the situation well under control and is continuing to make improvements.

Dr. Price to Give 32d NIH Lecture Here February 9

Dr. Derek de Solla Price, Avalon Professor of the History of Science at Yale University, will present the 32d National Institutes of Health lecture in the Clinical Center auditorium on Feb. 9 at 8:15 p.m.

His subject will be “Quantitative Measures of Size, Significance and Relatedness of Scientific Literature.”

Born in England, Dr. Price came to the United States in 1957 as a consultant in the History of Physics and Astronomy during the planning of the National Museum of History and Technology of the Smithsonian Institution.

In 1959, after a year as a Donaldson Fellow at the Institute for Advanced Study at Princeton, N.J., he joined the faculty of Yale University.

He is the author of “Little Science, Big Science” and “Science Since Babylon.” His lecture will deal with his research on the usefulness of the scientific literature to scientists.

Honors Noted

Dr. Price is an Honorary Research Associate of the Smithsonian Institution, a Consultant to the National Science Foundation, and a Corresponding Member of the International Academy for the History of Science.

Other honorary posts and memberships he has held in this country include the Science Information Council of the National Science Foundation, the Council of the History of Science Society, and the Council of the Society for the History of Technology.

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In short, the Division has the situation well under control and is continuing to make improvements.
vestigator should identify a material in larger amounts than expected in the urine of schizophrenics he will find more often than not that the abnormality in urine is a being with no parameter changes in pituitary-adrenal activity than of aberrations in brain function.”

Another view holds that schizophrenia is caused by a subtle poison formed from amines such as epinephrine, norepinephrine or serotonin. “The possibility that adrenochrome or adrenolutin, possible metabolites of adrenaline, is the toxic principle, is voided by its absence in body fluids,” Dr. Brodie commented.

“A recent theory, the methyla­tion concept, holds that the neurotoxin is a methylated derivative of serotonin or noradrenaline with structure similar to that of bufotenine or mescaline, potent psychotomimetics.”

Theories Weakened

These theories are weakened by the fact that the huge amounts of these methyalted products needed to produce an effect lasting one hour are greater than all the catecholamines made by the body in a week or more. Furthermore, he noted, “patients with mental disease do not display the autonomic changes. in pituitary-adrenal activity than of aberrations in brain function.”

Thus certain diseases of the neuromuscular system, such as myasthenia gravis and myotonia congenita, are not associated with an organic lesion but have been shown to be caused by a fault in nerve transmission, Dr. Brodie commented. “Evidence is accumulating,” Dr. Brodie said, “that drugs which induce mental illness do so by affecting neurohumoral transmission just as they do in the peripheral nervous system. And if derangements of the peripheral nervous system can be shown to arise from a failure or neurohumoral transmission then a similar possibility must be entertained for aberrations in mental function.”

Myasthenia gravis and myotonia congenita, are not associated with an organic lesion but have been shown to be caused by a fault in nerve transmission. “Similarly in diseases associated with a lowering of plasma potassium as in primary aldosteronism, familial periodic paralysis, or in clinical conditions associated with potassium loss,” he said, “there is a fault in neurohumoral transmission. The muscle is refractory to the neurohormone but regains its sensitivity after administration of potassium chloride.”

“Recent studies,” Dr. Brodie continued, “have given us an understanding of the processes involved in synthesis, storage, and release of noradrenaline from nerve endings and the processes involved in activating the target organ.”

Drugs Affect Transmission

“It is now evident that practically all drugs affecting this system do so by affecting neurohumoral transmission by mimicking, blocking or interacting in some way with the catecholamine transmitter.”

“Evidence indicates almost unequivocally that nerve impulses in the central nervous system,” he added, “are also transmitted from cell to cell through neurohumoral transmitters or modulators including acetylcholine, dopamine, norepinephrine and serotonin.”

Dr. Brodie suggested that mental diseases may be a regional fault in neurohumoral transmission in the brain. The actions of other psychotomimetic agents would be explained by their effects on neurohumoral transmission.

Concerning the many reports that have compared metabolite products of serotonin or noradrenaline in normal and mental subjects, he suggested that certain attitudes of research were prema-

This is a schematic model of the sympathetic neurochemical transducer. Norepinephrine (NE) in granules is pictured as a reserve pool on chemical equilibrium with NE in mobile pool. A lipid membrane with an active transport system or pump (heavy arrow) provides resistance to passage of NE from nerve ending to receptor and sites of metabolism (monooamine oxidase). The light arrow represents leakage of NE by passive diffusion across lipid membranes. Monoamine oxidase in mitochondria controls NE level thereby preventing its exit from the leak to receptor. The physiological release of the amine from mobile pool is regulated by nerve impulses which depolarize nerve terminals and allow release of NE.
Dr. Jonathan Cole Wins 1st Paul Hoch Award

Dr. Jonathan O. Cole, Chief of the Psychopharmacology Service Center, National Institute of Mental Health, was the recipient recently of the first Paul Hoch award for meritorious service in the field of neuropsychopharmacology.

Making the award was the American College of Neuropsychopharmacology. The award honors the memory of Dr. Paul Hoch, former Mental Health Commissioner for the State of New York.

Award Honors Pioneer

Dr. Hoch was a pioneer in psychopharmacology and was a past president of the American College of Neuropsychopharmacology.

Announcement of the award was made at the group's recent meeting in San Juan, Puerto Rico. Dr. Cole also was named president-elect at that meeting.

Membership of the American College of Neuropsychopharmacology is composed of several disciplines in the field of mental health.

The organization was formed five years ago, Dr. Cole said, to promote and improve exchange of information between the various disciplines.

Dr. Cole has been Chief of the NIMH Psychopharmacology Service Center since its creation in August 1956.

PSYCHIATRY

(Continued from Page 1)

only 12% of psychiatrists considered mental retardation to be their main field of interest.

Other facts reported by the survey:

• Psychiatric tend to congregate in big cities. Nearly one-third live in cities of 3 million or more where only 17 percent of the population is located.
• About 17 percent are naturalized citizens, 7 percent are aliens, and 3 percent have applied for citizenship.

Female Rate High

• Twelve percent are women, an rate higher than that for most medical specialties.
• Seventy-two percent of the respondents psychiatrists work full-time; 19 percent are in training; 5 percent work part-time; only 2 percent are retired.
• Approximately 37 percent of psychiatrists have passed their specialty board examinations and are certified. Approximately 25 percent of child psychiatrists are certified out of the 1,346 who regard their specialty as child psychiatry.

The complete report, a major activity of a 5-year manpower study on psychiatrists, will be published by NIMH early this year.

Dr. Leung Tours 14 African Countries, Collects Samples, Data for Food Tables

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Natives in this Sudan marketplace are shown buying and selling their staple food—maize, millet or sorghum. Grain may be bought ground or whole in this market, one of the largest in the area. The grain is weighed and carried away in any available receptacle, such as cans or handmade baskets.

By Frances Davis

Traveling entirely alone—burdened with official papers, suitcases and cameras—diminutive Dr. Woot-Tsuen Wu Leung recently completed a two and one-half month tour of 23 key cities in 14 African countries to compile data for food composition tables.

In cooperation with the Food and Agriculture Organization of the United Nations, Dr. Leung of the Nutrition Section of the Office of International Research, NIH, conferred with officials of the English-speaking African governments, international organizations, and universities.

During her travels she also inspected local markets and collected samples of various foods for which present analytical data are scanty or nonexistent. Various staple foods commonly used in different areas were selected to be shipped through American Embassy air pouch to the United States for complete analysis.

Wherever Dr. Leung visited the markets, happy and curious children flocked around her. Here she visits a village near Addis Ababa, Ethiopia. 

The pamphlet, "Cancer of the Prostate," is the ninth in a series of 10 prepared for the general public on cancer of different body sites.

The prostate, which lies just below the bladder, is one of the most common sites of cancer in older men. According to the pamphlet, many prostate cancers can be discovered early—often before they display symptoms—when the chance of successful treatment is greatest.

Symptoms Cited

Continuing urinary difficulty or pain in the pelvis, lower back, or both may be a symptom of cancer. Urinary difficulties can be caused, however, by a non-cancerous enlargement of the prostate, which occurs in more than half of all U.S. men over 50, or by other conditions.

Other pamphlets in the NCI series deal with cancer of the breast, uterus, skin, bone, lung, stomach, larynx, and colon and rectum. They discuss symptoms, diagnosis, treatment, related conditions, research, and the nature of cancer.

Single copies of "Cancer of the Prostate" (PHS Publication No. 1352) are available without charge from the Public Health Service, Washington, D. C. 20201.

The pamphlet may be bought in quantity from the Superintendent of Documents, Government Printing Office, Washington, D. C. 20402, at five cents a copy or $2.75 per 100 copies.

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A grant of $4.3 million to the Sloan-Kettering Institute for Cancer Research in New York City to inaugurate long-term support of its cancer research on a cost-sharing basis was announced recently by Surg. Gen. William H. Stewart of the Public Health Service.

Representing about 47 percent of the Institute's annual operating budget of $91 million, the award will replace current PHS grant and contract support of some 52 individual projects. It was made under a 5-year agreement with Sloan-Kettering approved by Dr. Stewart on recommendation of his National Advisory Cancer Council.

**Funds Decrease**

Funds to be provided for the next two years under the agreement are somewhat less than the amount that would be available under existing commitments.

Subsequent increases will bring the grant to an annual level of $47.4 million out of an estimated operating research budget for the Institute of approximately $10 million in 1970.

The decision to adopt a single-instrument method of support was reached after long and careful study by the National Cancer Institute, which will administer the grant.

Dr. Kenneth M. Endicott, NCI Director, said the single instrument type of support is intended to expedite research by giving the grantee institution increased flexibility in deploying funds as new leads in cancer research develop.

**Sloan-Kettering Institute**

Sloan-Kettering Institute is a part of Memorial Sloan-Kettering Cancer Center which also includes the 278-bed Memorial Hospital for Cancer and Allied Diseases. The Institute's President and Director is Dr. Frank L. Horsfall Jr.

The entire Institute research program — clinical investigation, chemotherapy, biophysics, virology and immunology, chemistry, cytology, environmental cancerogenesis, and pathology — will be supported under the cost-sharing grant.

Among the exclusions are construction costs, purchase of capital equipment, and patient care costs. Care of patients participating in Sloan-Kettering Institute studies is a responsibility of Memorial Hospital for Cancer and Allied Diseases for which separate PHS grant support may be requested.

Sloan-Kettering will receive no other grant or contract support for research, training or special programs from PHS during the agreement's 5-year period.

**Other Grants Possible**

Requests may be made, however, for research facilities construction grants administered by the Service under other authority, and PHS fellowships may be awarded to eligible individuals affiliated with the Institute.

The PHS commitment is contingent upon Sloan-Kettering's continuing to receive no less than half of its support from other sources, including private gifts and grants.

The Institute is regarded as an appropriate testing area for a single instrument grant, PHS said, because it is totally committed to cancer research and research training and has no major function of patient care or medical education.

**Recruits Dr. Shannon**

Dr. Van Slyke brought to the Institute its first Scientific Director, Dr. James A. Shannon, now Director of NIH, who founded the Institute's own research program. Progressing soundly, the intramural program pioneered in basic research as well as clinical studies, resulting in outstanding findings.

As the PHS and NIH continued to grow, Dr. Van Slyke was again called upon to assume new responsibilities; and in 1952 he became Associate Director — and later, Deputy Director — of NIH, serving with the rank of Assistant Surgeon General until his retirement.

During these years, he helped particularly in pioneering new programs to meet critical needs in many areas of scientific interest.

**Dr. Colvin Gibson Named Science Bulletin Editor**

**In contrast to adult animals inoculated parenterally, none of these young *Calomys* had detectable virus-neutralizing antibodies 20 weeks after potential first exposure to infection.**

**Hemorrhagic**

**HEMORRHAGIC**

**The NIH Record**

**January 25, 1966**
Dr. Sirotkin Appointed Assistant Director of Mental Health Institute

Dr. Phillip L. Sirotkin has been appointed Assistant Director of the National Institute of Mental Health, it was announced last week by Dr. Stanley F. Yolles, Institute Director.

In his new position Dr. Sirotkin will serve as the Director's principal staff assistant and advisor on legislative development, program planning, program analysis and evaluation, inter-agency liaison and field operations.

He will direct and coordinate the activities of the various staff offices established to carry out the above functions, as well as those of the Office of Biometry and the NIH Regional Offices.

Has Extensive Experience

Dr. Sirotkin brings to his post a broad view of mental health programs, having been active in key positions at the State, regional and Federal levels. He recently completed a review of trends in mental health concepts as developed in several countries in Europe.

Before his appointment as Assistant Director, Dr. Sirotkin served NIMH as consultant and later as Special Assistant to the Associate Director for Extramural Programs.

Prior to joining the Institute in February 1964, Dr. Sirotkin was a special consultant to the Office of Human Resources and Social Development, Agency for International Development.

From 1960 to 1963, he was Executive Assistant to the Director of the California Department of Mental Hygiene.

Academic Background Noted

Dr. Sirotkin was born in Moline, Ill., and attended Wayne State University from 1941 to 1943 as a McGregor Foundation scholar.

Following service in the U.S. Army (1943-46), he attended the University of Chicago as a Wallace scholar and as a Carnegie Fellow earning his M.A. and Ph.D. degrees in Political Science in 1947 and 1951, respectively.

In 1950, Dr. Sirotkin joined the staff of Wellesley College in Massachusetts as an instructor and later became Assistant Professor of Political Science. He earned the Wellesley College Research Award in 1957.

That same year he was appointed Assistant Director of the Mental Health Project of the Western Interstate Commission for Higher Education (WHCE) to develop its first mental health training and research program.

He later held the post of Associate Director for Regional programs, WICHE, before joining the California Department of Mental Hygiene.

Dr. Sirotkin is a member of the American Public Health Association, the American Society for Public Administration, the American Political Science Association and is a former member of the Board of Directors of the Council on Social Work Education.

Supply Management Urges Increased Use Of Reconditioned Furniture, Equipment

On display in the Property Utilization warehouse in Bldg. 13 are these examples of reconditioned equipment and unrequired office furniture. At left, George O. Jarrels, Head of SMB's Property Utilization office, stands by reconditioned furniture and equipment, while Charles Kerr, warehouse Supervisor, stands amid assorted unrequired furniture that, after reconditioning, will resemble and be as serviceable as new.—Photo by Thomas Joy.

James B. Davis, Chief of the Supply Management Branch, OD, reports that the reconditioning of unrequired office furniture and equipment has taken on added significance as a result of recent directives issued by the President and the DHHS.

These directives are designed to reduce Federal expenditures for the purchase of new office furniture, typewriters and other equipment.

To implement the directives and to strengthen the NIH property utilization program, Mr. Davis said, policy and procedure memoranda have been issued detailing the restrictions and limitations on acquisition of new office equipment, and placing greater emphasis on the utilization of available excess and reconditioned property.

Furniture "Restored"

Frequently, items of office furniture judged to be ready for "retirement," he said, can be restored in appearance and serviceability equal to that of new equipment.

The cost of reconditioning is approximately one-half the price of new equipment, he noted, adding that ordering activities can reap substantial savings by utilizing reconditioned equipment.

Reconditioning and rehabilitation of unrequired office equipment is a major function of the Property Management Unit of the Property and Supply Section, SMB.

A display of reconditioned furniture may be seen in the Property Utilization warehouse in Bldg. 13, Rm. 2773. Complete information may be obtained by calling Ext. 64615.

Accidently Fired Bullet Kills Anna Reimer, CC Dietetic Service Chief

Anna O. Reimer, 51, Chief of the CC Nutrition Department's Patient Dietetic Service, died instantly near Rockville on Jan. 8 when struck by a bullet fired accidentally by a boy cleaning his rifle.

Miss Reimer joined the PHS Commissioned Corps in 1952 and came to NIH to help plan the CC's Nutrition Department.

Beginning with a small staff of dietitians when the Clinical Center opened in mid-1953, Miss Reimer's staff and responsibilities grew as the patient census steadily increased to the current daily average of 400.

Develops Dietetic Service

She developed a high caliber Patient Dietetic Service to meet the needs of the various Institutes' clinical research studies, all of which have a nutrition emphasis and implication.

Prior to her appointment here, Miss Reimer held supervisory and teaching positions in the hospital dietary departments at the Universities of Michigan and Iowa.

She wrote numerous technical and scientific articles on nutrition and dietary research, and was the author of the first manual for dietary procedures for use in a hospital devoted solely to research.

Edith Jones, Chief of the CC Nutrition Department, described Miss Reimer as "one of the most outstanding dietitians in the field," and said that by example and leadership she encouraged and inspired young dietitians on her staff.

Miss Reimer was born and lived in Buhler, Kans., until she went to Kansas State College of Agriculture and Applied Sciences, where she received a B.Sc. in Home Economics in 1938.

Other Degrees Listed

She received her M.Sc. degree in Nutrition the following year from the University of Iowa. In 1964 she took a leave of absence from the CC and earned her Master's degree in Public Health from the University of California.

She was a member of several professional organizations, including the American Public Health Association, the Commissioned Officers Association of the PHS, and the Association of Military Surgeons of the U.S.

She is survived by her parents, Mr. and Mrs. G. F. Reimer, and a brother and three sisters, all of Buhler, Kans.
Lucy H. Chaconas and 6 Others Retire From Mental Health Institute

Lucy H. Chaconas, who joined the National Institute of Mental Health in 1949, during its first year of existence, retired Dec. 30. She was one of seven Institute staff members whose retirements were announced recently.

Also retiring at the end of 1965 was George Landsman, Consultant on Aging and Chronic Diseases for the NIMH Community Research and Services Branch. A native of Brooklyn, N.Y., he had been with the Public Health Service since 1950. He joined the NIMH staff in 1961.

Mrs. Chaconas served as Clear-ance Officer in the NIMH Public Information Section and was responsible for the clearance processing of professional and scientific manuscripts submitted by investigators and staff writers.

Born in France

Born and educated in France, she met her husband, Nicholas T. Chaconas, in Paris and became an American citizen by marriage.

During World War II she was active as a full-time volunteer. She joined the American Red Cross Motor Corps, served as Chairman of the Blood Donor detail, and took an active part in other Red Cross activities.

She was also chairman of the Community War Fund for the United Nations, representing the American Relief for France. In recognition of her services, she received the Army-Navy “E” award and a certificate of merit from the President of the United States.

Lab Still Seeks Volunteers For ‘Common Cold’ Study

Although pleased with the response to previous calls for volunteers for its “common cold” study, NIAID’s Laboratory of Infectious Diseases is still in need of support for this long-term research project.

At this peak season of the “common cold,” employees with colds are requested to contribute samples of nasal secretions plus two blood samples. Participants receive $2 for each blood sample.

Appointments may be made by calling Mrs. Sara Kelly or Harvey James on Ext. 65811. It would be best to do so within the first three days of infection.

The NIH Federal Credit Union recently celebrated its 25th anniversary with twin parties for NIH personnel, held simultaneously in Buildings 10 and 31, at which 10 CU members, who have maintained their memberships continuously since it opened, received $25 checks. In the picture at left, Dr. Robert Farrier, CC Associate Director, cuts the cake to begin festivities in Building 10. Around him are from left: A. C. Faber, Henry W. Diehl, Ervin J. Liljegren, Dr. Farrier, Fred Krumh, Edwin C. Thompson and Howard F. Brubach. At right, Walter Magnrud, CU past president does the honors. With him are from left: Dr. Harold P. Morris, William R. Piggott, Ruth Secor, Dr. Leon Jacobs and Mr. Magrudger. Those honored were Mr. Faber, Mr. Diehl, Mr. Thompson, Mr. Brubach, Mr. Piggott, Miss Secor and Dr. Jacobs. Unavailable for the picture-taking were Dr. Walter Newton, Dr. Bernice Eddy, and Miss Inez Demonet.

—Photos by Jerry Hecht and Ed Hubbard.

NIGMS Grant Supports Drug Toxicity Research

The actions of drugs in the body and techniques for avoiding undesirable side effects from them will be studied by George Washington University scientists under a grant from the National Institute of General Medical Sciences.

The $123,768 award, for the first year of a 3-year project, was announced last week by Dr. William H. Stewart, Surg. Gen. of the Public Health Service.

Dr. H. George Mandel, Chairman of the Department of Pharmacology at George Washington, will direct a research program on factors which influence effects of drugs, especially toxic effects.

Dr. Mandel hopes these studies will put the predictability of drug toxicity on a more rational basis, and may also be of practical value in assessing the utility of present and future drugs in a particular patient.

Drug Metabolism Is Focus

University scientists will focus their research on drug metabolism in the belief that the breakdown products of drugs are potentially as hazardous as the parent drug. They will study the metabolic by-products of a number of drugs to see if it is possible to modify the molecules so as to avoid the development of harmful metabolites within the body.

Included in the research program will be: James F. Kieley, Chief, Research Information Branch, NCI; Clifton R. Read, Vice President for Public Education and Information, American Cancer Society; Harold M. Schmeck, Jr., Science Writer, The New York Times; and Dr. Michael B. Shimkin, Chief of Cancer Biology, Professor of Medicine, Johns Hopkins University, Baltimore.

There will also be biochemical studies of the mechanism of action of various central nervous system drugs. The goal of the over-all program is to gain insight into molecular interactions, and thereby develop a rational basis for predicting toxicity.

Tests will be performed on monkey tissue in an effort to produce drug reactions similar to those which occur in man. Individual variations in reactions and variations which are related to the sex and age of the experimental animal will be examined.

In addition, by studying the hereditary traits which control drug-metabolizing enzymes in highly inbred mice, a genetic basis for variations in drug reactions will be sought.

List of Latest Arrivals Of Visiting Scientists

12/30—Dr. Garry Charlton, Australia, Research in the Gnotobiotics Section, Sponsor: Dr. R. J. Fitzgerald, NIDR, Bldg. 3, Rm. 324.

1/3—Dr. Gerhard Althaus, France, Research in the Laboratory of Biochemistry, Sponsor: Dr. Roy Vagelos, NIH, Bldg. 3, Rm. 324.

1/3—Dr. Jacques Audet, Canada, Research in Anesthesiology Department, Sponsor: Dr. C. L. Hert, CC, Bldg. 10, Rm. 10N202.

1/3—Dr. Roland Bernheim, France, Research training in the Clinical Endocrinology Branch, Sponsor: Dr. F. C. Barter, NIH, Bldg. 10, Rm. 8N214.

1/3—Dr. Marc A. Leng, France, Research in the Section on Physical Chemistry, Sponsor: Dr. G. Felsenfeld, NIAMD, Bldg. 2, Rm. 302.

1/3—Dr. Regitze Shoup, Denmark, Research training in the Section on Molecular Biophysics, Sponsor: Dr. L. L. Benner, NIH, Bldg. 3, Rm. 8101A.

1/3—Dr. Anni Penttila, Finland, Research in the Chemistry Section, Sponsor: Dr. R. J. Hight, NIH, Bldg. 10, Rm. 7N320.

Final Figures Issued on ‘Davis Plan’ Donations

The final report on NIH employees’ donations through the “Davis Plan” to the Patients’ Welfare Fund during the recent holiday period reveals a total of $2,380.42. This figure was confirmed Jan. 12 by John F. Roach, Chief of the CC Social Work Department, who administers the Fund. The “Davis Plan” agrees to contribute to the Fund in lieu of Christmas cards to NIH friends.

In expressing his gratitude to everyone who has made a contribution to the fund, Dr. Jack Masur, CC Director, pointed out that about $10,000 will be needed to meet the current annual patient needs and that gifts to the Fund will be welcome throughout the year.